## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

									96	,50	38-E	<u>c</u>
		CLAIMS A	S FILED - PART (Column 1)		(Column 2)		SMALL ENTITY TYPE		OF	OTHER	R THAN ENTITY	
TOTAL CLAIMS			10				RAT	E	FEE	7	RATE	FEE -
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/0 - minus 20=		* Ø		XS S	=		OR.	X\$18=	
INDEPENDENT CLAIMS			2 - minus 3 = *				X43	=		OR	X86=	
MULTIPLE DEPENDENT CLAIM P			RESENT		<u> </u>		+145	_		OR	+290=	
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTA	L		OR	TOTAL	7700
	C	CLAIMS AS A	MENDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OR	OTHER SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EST BER OUSLY	PRESENT EXTRA	RATI	- 1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=	
	Independent	*	Minus	***		= ,	X43=			OR	X86=	·
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	=		OR	+290=	
								AL EE			TOTAL ADDIT, FEE	·
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent	* Minus *** NTATION OF MULTIPLE DEPENDENT C		CL AINA	=	X43=			OR	X86=		
	PINOT PHESE	NTATION OF MC	JETIPLE DEF	PENDENT	CLAIN		+145=			OR	+290=	
							TOTA ADDIT. FE	E L		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X43=			OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1		Ī	+290=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR [ OR ,	TOTAL	
***	f the "Highest Nur	mber Previously Pa ber Previously Paid	id For" IN THIS	S SPACE is	less than	n 3, enter "3."	ADDI1. 1 C			^	DDIT. FEE <b>L</b> mn 1.	